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## \*\* CONTINUING DATA \*\*\*\*\*

*or None*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*or None*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY | SHEETS        | TOTAL<br>CLAIMS | INDEPENDENT<br>CLAIMS |
|---------------------------------|--|---------------------|---------------|-----------------|-----------------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | CO                  | DRAWING<br>16 | 27              | 3                     |
| Verified and Acknowledged       | <i>[Signature]</i><br>Examiner's Signature   | Initials            |               |                 |                       |

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## TITLE

Microwavable metallic container

|                 |   |  |
|-----------------|---|--|
| FILING FEE      | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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